



PTO/SB/31 (08-03)

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| <b>NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES</b>   |  | <b>Docket Number (Optional)</b><br>9988.081.00-US    |  |
| In re Application of<br>Bo Yeon KIM  |  |  |  |
| Application Number<br>10/717,974 - Conf. #8004   |  | Filed<br>November 21, 2003                           |  |
| For<br>CABINET COVER OF HOME APPLIANCE   |  |  |  |
| Art Unit 3637<br>(insert art unit)   |  | Examiner James O. Hansen<br>(insert examiner's name) |  |
| Applicant hereby <b>appeals</b> to the Board of Patent Appeals and Interferences from the last decision of the examiner.   |  |  |  |
| The fee for this Notice of Appeal is (37 CFR 1.17(b))  |  | \$ 500.00  |  |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:   |  | 09/06/2007 CNGUYEN2 \$0000027 10717974               |  |
| <input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.  |  | 01 FC:1401 500.00 OF                                 |  |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.  |  |  |  |
| <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.   |  |  |  |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 50-0911. I have enclosed a duplicate copy of this sheet. |  |  |  |
| <input checked="" type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.   |  |  |  |
| I am the   |  |  |  |
| <input type="checkbox"/> applicant /inventor   |  |  |  |
| <input type="checkbox"/> assignee of record of the entire interest.<br>See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)   |  | Signature<br>Mark R. Kresloff                        |  |
| <input type="checkbox"/> attorney or agent of record.<br>Registration number   |  | Typed or printed name                                |  |
| <input checked="" type="checkbox"/> attorney or agent acting under 37 CFR 1.34(a).<br>Registration number if acting under 37 CFR 1.34(a) 42,766  |  | (202) 496-7500<br>Telephone number                   |  |
|  |  | September 5, 2007<br>Date                            |  |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.                               |  |  |  |
| <input checked="" type="checkbox"/> *Total of 1 forms are submitted.   |  |  |  |